

Supplemental Application Data Sheet

Application Information

Application number::	09/322,289
Filing Date::	05/28/99
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	Yes
Computer Readable Form (CRF)?::	Yes
Number of copies of CRF::	1
Title::	PREVENTION AND TREATMENT OF AMYLOIDOGENIC DISEASE
Attorney Docket Number::	15270J-004740US
Request for Early Publication::	No
Request for Non-Publication::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	16
Small Entity?::	No
Latin name::	
Variety denomination name::	
Petition included?::	Yes
Petition Type::	Petition to Extend Time Under 37 C.F.R. §1.136a
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Dale
Middle Name:: B.
Family Name:: Schenk
Name Suffix::
City of Residence:: Burlingame
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1542 Los Altos Drive
City of Mailing Address:: Burlingame
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94010

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	09/201,430	11/30/98
09/201,430	Non-Provisional of	60/080,970	04/07/98
09/201,430	Non-Provisional of	60/067,740	12/02/97

Foreign Priority Information

Country::	Application number::	Filing Date::
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Assignee Information

Assignee Name:: Neuralab LimitedJanssen Alzheimer
Immunotherapy
Street of mailing address:: 402 St. James CourtLittle Island Industrial Estate
City of mailing address:: Flatts, SmithLittle Island
State or Province of mailing address:: County Cork
Country of mailing address:: BermudaE
Postal or Zip Code of mailing address:: FL 04

Submitted by:

Signature Rosemarie L. Celli

Date 11/18/09

Printed Name Rosemarie L. Celli Registration Number 42,397